

FORM  
5

Rev  
02/08

# State of Colorado

## Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400532880

Date Received:

### DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type  Final completion  Preliminary completion

1. OGCC Operator Number: 19160 4. Contact Name: Ali Savage  
 2. Name of Operator: CONOCO PHILLIPS COMPANY Phone: (281) 2065359  
 3. Address: P O BOX 2197 Fax: (281) 2065721  
 City: HOUSTON State: TX Zip: 77252-

5. API Number 05-005-07210-01 6. County: ARAPAHOE  
 7. Well Name: Tebo 4 Well Number: 1H  
 8. Location: QtrQtr: SWSW Section: 4 Township: 5S Range: 64W Meridian: 6  
 Footage at surface: Distance: 900 feet Direction: FSL Distance: 250 feet Direction: FWL  
 As Drilled Latitude: 39.640261 As Drilled Longitude: -104.565447

GPS Data:

Date of Measurement: 02/07/2014 PDOP Reading: 1.4 GPS Instrument Operator's Name: Dallas Nelson

\*\* If directional footage at Top of Prod. Zone Dist.: 667 feet. Direction: FSL Dist.: 897 feet. Direction: FWL  
Sec: 4 Twp: 5S Rng: 64W

\*\* If directional footage at Bottom Hole Dist.: 661 feet. Direction: FSL Dist.: 481 feet. Direction: FEL  
Sec: 4 Twp: 5S Rng: 64W

9. Field Name: WILDCAT 10. Field Number: 99999  
11. Federal, Indian or State Lease Number: \_\_\_\_\_

12. Spud Date: (when the 1st bit hit the dirt) 12/27/2013 13. Date TD: 01/24/2014 14. Date Casing Set or D&A: 01/27/2014

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 12040 TVD\*\* 7705 17 Plug Back Total Depth MD 12035 TVD\*\* 7705

18. Elevations GR 5888 KB 5912 One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:  
MWD Lateral, MWD Curve, Mud, CBL

20. Casing, Liner and Cement:  
  
**CASING**

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	26	16	CMP	0	100	50	0	100	VISU
SURF	13+1/2	9+5/8	36	0	2,188	680	0	2,200	VISU
1ST	8+3/4	7	32	0	8,097	510	86	8,097	CBL
1ST LINER	6	4+1/2	13.5	7004	12,040	335	7,004	12,040	CALC

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date: \_\_\_\_\_

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom

Details of work:

21. Formation log intervals and test zones:

**FORMATION LOG INTERVALS AND TEST ZONES**

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
SUSSEX	4,983		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	5,267		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	7,640	7,797	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,797		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_

Print Name: Ali Savage

Title: Regulatory Specialist

Date: \_\_\_\_\_

Email: ali.savage@conocophillips.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400532881	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400560793	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b>Other Attachments</b>			
400556330	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400556336	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400556338	LAS-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400556339	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400556340	LAS-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400556344	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400556345	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400560794	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400561739	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)